Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

CLAIMS AS FILED - PART I								SMALL ENTITY			OTHER THAN		
		7-11	(Column 1)		(Column 2)			TYPE		OR	SMALL	ENTITY	
TOTAL CLAIMS							Г	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			3 minus 20=		. 10			X\$ 9=		OR	X\$18=	180-	
INDEPENDENT CLAIMS				nus 3 =				X40=		OR	X80=	80-	
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=		
* If	the difference	in column 1 is	less than ze	s than zero, enter "0" in column 2				TOTAL		OR	TOTAL	9710 -	
CLAIMS AS AMENDED - PART II										-	OTHER	THAN	
(Column 1) (Column 2) (Column 3)								SMALL E	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		PREVI	HEST BBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	NTATION OF M	Minus	***	T CL AINA	=		X40=		OR	X80=		
<u> </u>	FINOT PRESE	NIATION OF MI	OLTIPLE DEP	CINDEIN	CLAIM			+135=		OR	+270=		
							L_	TOTAL		OR	TOTAL ADDIT. FEE		
		AL	ODIT. FEE (U	AUUII. FEE							
		(Column 1)			mn 2) HEST	(Column 3)		······································	ADDI	1 6			
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		<u> </u> =		X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							.105			+270=		
								+135=		OR			
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	mn 2) HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	*	Minus	***		=		X40=		OR	X80=		
	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	T CLAIM] 			UΠ			
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+270=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."													
		ber Previously Pa					er found	d in the app	ropriate box	(in col	umn 1.		